

Wisconsin Forward Health interChange System Managed Care Capitation Payment Rate Cells

Current WI MMIS System Capitation Payments

- Capitation payments are processed and stored as a claim using state defined procedure codes.
- Each procedure code has associated rates defined for specific time periods.
- Procedure codes are built based on the following information: County (location), age, gender, HMO services provided, medical status code and Medicare status (for SSI HMOs).
- The procedure code is based on demographic, managed care services provided and eligibility information and not based on a specific Managed Care Organization or county/region.
- State is broken into 6 different Department of Health Services Regions with counties defined inside the regions receiving the same rate. A separate procedure code is used for each county in a region with the same rates.

Forward Health interChange System Capitation Payments

- Capitation payments are processed and stored as financial transactions and associated to five character intelligent keys called Rate Cells.
- Each Rate Cell has capitation rates defined for specific time periods.
- Rate Cells built based on the following information: County (location), age, gender, HMO coverage, medical status code and Medicare status (for SSI HMOs).
- The Rate Cell is based on demographic, managed care program and eligibility information and not based on a specific Managed Care Organization or county/region.
- One Rate Cell will have different rates specified for each of the 6 distinct DHS regions.

Rate Cell Key

1st Character

BadgerCare Plus

A or W = BadgerCare Plus Standard Plan

F or Y = BadgerCare Plus Benchmark Plan

G = BadgerCare Plus Standard Plan – Pregnant Woman

V = BadgerCare Plus Benchmark Plan & Dental – Pregnant Woman

SSI HMO Managed Care:

L = Medical Status Code of 21 and Member is not enrolled in Medicare

M = Medical Status Code 21 and Member is enrolled in Medicare

Q = Medical Status Code M3 or M4 and Member is not enrolled in Medicare

S = Medical Status Code M3 or M4 and Member is enrolled in Medicare

T = Any other valid SSI Medical Status Code and Member is not enrolled in Medicare

U = Any other valid SSI Medical Status Code and Member is enrolled in Medicare

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2nd & 3rd Characters

CT = Represents a place holder for the six DHS SSI Managed Care Regions

HR = Represents a place holder for the six DHS HMO Managed Care Regions

4th Character

HMO Managed Care BadgerCare Plus (Standard, Benchmark, Benchmark & Dental)

Code	Age	Gender
A	< 1	Male or Female
B	1-5	Male or Female
C	6-14	Male or Female
D	15-20	Male
E	15-20	Female
F	21-34	Male
G	21-34	Female
J	35-44	Male
K	35-44	Female
L	45+	Male
M	45+	Female

SSI – HMO Managed Care Programs*

Code	Age	Gender
G	<30	Male
H	<30	Female
I	30 – 39	Male
J	30 – 39	Female
K	40 – 64	Male
L	40 – 64	Female
M	65 – 999	Male
N	65 – 999	Female
X	000-999	MAPP Female
Y	000-999	MAPP Male

* Medical status codes M3 and M4 do not have an age/gender requirement.



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5th Character

HMO Managed Care BadgerCare Plus (Standard, Benchmark, Benchmark & Dental) and All SSI-HMO

- 1 = Medical Services Only Services Covered by the HMO
- 2 = Medical & Chiropractic Services Covered by the HMO
- 3 = Medical & Dental Services Covered by the HMO
- 4 = Medical, Chiropractic & Dental Services Covered by the HMO